

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E AUG 15 2005

1. File Number U - <u>7139</u>	2. Fiscal Year Covered From: <u>01</u> / <u>01</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>RUSSELL J SCHERBER</u> P.O. Box, Bldg., Room No., if any Street <u>11660 ENOKOTT AVE NW</u> City <u>BUFFALO</u> State <u>MN</u> ZIP Code + 4 <u>55313</u>	4. Name, file number, and address of labor organization. Name <u>PIPEFITTERS LOCAL UNION No. 539</u> Labor Organization File Number <u>019537</u> P.O. Box, Building and Room Number, if any Street <u>312 CENTRAL AVE ROOM 408</u> City <u>MINNEAPOLIS</u> State <u>MN</u> ZIP Code + 4 <u>55414</u>
5. Position in labor organization. <u>ASSISTANT BUSINESS MANAGER</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>EGAN MECHANICAL CONTRACTORS</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <u>7625 BOONE AVE N</u> City <u>BROOKLYN PARK</u> State <u>MN</u> ZIP Code + 4 <u>55428</u>	7.a. Nature of Interest, Transaction, or Income. <u>ON 07/11/04 I MET WITH STEVE MCINTOSH & GENE TRAVELLES AT CAPS REGARDING THE FILMTEC PROJECT. DISCUSSED LABOR NEEDS & SAFETY CONCERNS OF DOW CHEMICAL.</u> 7.b. Amount. <u>\$14.00</u> <i>Russell J. Scherber</i>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Russell J. Scherber

On

07/06/05

Date

(612) 379-4711

Telephone Number

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any).

Name **HORWITZ INC.**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street **18225 85TH AVE N**

City **BROOKLYN PARK**

State **MN** ZIP Code + 4 **55420**

7.a. Nature of Interest, Transaction, or Income.

ON 07/24/2014, I WAS A MEETING AT BROADWAY 1212A WITH JEFF O'NEALE-ABESY ATTORNEY THE FOLLOWING CONTRACT NEGOTIATIONS.

7.b. Amount.

\$12,000

Russell J. Schuler

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any).

Name **CRATER BATHING CENTER**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street **5716 PLEASANT AVE S**

City **MINNEAPOLIS**

State **MN** ZIP Code + 4 **55403**

7.a. Nature of Interest, Transaction, or Income.

ON 07/24/2014, I WAS A MEETING AT CRATER BATHING CENTER WITH JEFF O'NEALE-ABESY ATTORNEY THE FOLLOWING CONTRACT NEGOTIATIONS.

7.b. Amount.

\$12,000

Russell J. Schuler

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

7.a. Nature of Interest, Transaction, or Income.

7.b. Amount.